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ICANotes Behavioral Health EHR

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SOS
610 N. Silver St
Silver City, NM 88061

575-956-6131
575-956-6947

Lopez, Henry

ID: 1000010738264 DOB: 8/20/1962

Case Management Note (SOS)

Use Note Creation Time
Clear Time
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7/30/2023
2:11 AM

Service Location

Audit Log

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Presenting Problem:
Henry continues to experience anxiety.
Henry continues to experience mood swings.

Recent history :
Client has a history of reoccurring homelessness, unemployment, financial instability, alcohol abuse. Struggles with extreme poverty, anxiety, depression, mood swings, schizoaffective disorder.

Social Support Changes:
Henry's family or social support network has occurred no changes.

Therapeutic intervention :
Client was assisted in switching out mats and bedding, after he had wet himself/ While let into the laundry room to find a clean change of clothes, and allowed a shower, staff switched mats, cleaning the wetted mat down, then started a load to wash the soiled linens and clothes. Clean sheets and bedding were provided, and placed on his bunk.

Assessment :

BEHAVIOR:
Compliance with medication is good. He needs assistance or cues for self care tasks. His domestic skills are intact. He is socializing less with family and friends. His work performance is normal. There are no early signs of substance abuse relapse and sobriety has been maintained. His school performance is normal. No anger has been displayed. Impulsive behaviors are occurring, but less frequently. Henry has normal food and fluid intake. Henry is almost always confused.

Henry presents as calm, inattentive, minimally communicative, casually groomed, normal weight, and relaxed. and slow to respond. He exhibits speech that is normal in rate, volume, and articulation and is coherent and spontaneous. Language skills are intact. Mood presents as normal with no signs of either depression or mood elevation. There are no apparent signs of hallucinations, delusions, bizarre behaviors, or other indicators of psychotic process. Associations are intact, thinking is logical, and thought content appears appropriate. The patient convincingly denies suicidal ideas or intentions.

Plan: Continue to accommodate client to the best of shelter abilities and continue to prompt client to continue participating in programming plans now being implemented by shelter staff.

Diagnosis :

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